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Case 2:06-cv-00242-MH	SERDER: COMPLETE THIS SECTION ed 03/24	COMPLETE THIS SECTION ON DELIVERY
·	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly) B. Date of Deliver 3 - 3 - 0k C. Signature Agent Addresse D. Is delivery address different from item 1? Yes
	Article Addressed to:	If YES, enter delivery address below:
	Pharmacia Corp. flot/bla 1933 Monsando	
	clothe comp. Co. 2000 Interstate PARKOr.	3. Service Type Certified Mail Registered Express Mail Return Receipt for Merchandis
ge co nstruction of the construction of the c	Montgomery, al. 36109	☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes
	Article Number (Copy from service label)	7005 1820 0007 2209 1109
	PS Form 3811, July 1999 Domestic Ret	turn Receipt . 102595-00-M-0952
	en e	
	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly) B. Date of Delivery 3-23-24 Agent Addresse Addresse Addresse Addresse
	Article Addressed to:	D. is delivery address different from item 1?
	Pharmacia & Upjohn, Co.	
	clothe Carp. Co. 2000 Interstate Park Dr.	
	2000 Interstate PARKUR.	3. Service Type
	Ste. 204 Montgomery, al. 36109	☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Receipt for Merchandis ☐ C.O.D.
	2:060242-T	4. Restricted Delivery? (Extra Fee) ☐ Yes
	2. Article Number (Copy from service label;	05 1820 0007 2209 1086
	PS Form 3811, July 1999 Domestic Re	eturn Receipt 102595-00-M-095
		and the first of the second of

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Case 2:06-cv-00242-Mh	SENDER: COMPLETE THIS SECTION ed 03/2	COMPLETE THIS SECTION ON DELIVERY
	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly) B. Date of Deliver 3-23-9 C. Signature Agent Addresse D. Is delivery address different from item 1? Yes
	Article Addressed to:	If YES, enter delivery address below:
	Pfizer, Inc.	
	Clothe Corp. Co. 2000 Interstate Park Dr.	
	2000 Interstate PARK Dr.	3. Service Type
	Ste. 204	Certified Mail
W. W. W. C.	Montgomery, al. 36109	☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes
	2. Article Number (Copy from service label)	7005 1820 0007 2209 1079
	PS Form 3811, July 1999 Domestic Re	turn Receipt , 102595-00-M-0952
	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly) B. Date of Deliver 3 - 23 - 26 C. Signature Agent D. Is delivery address different from item 1? Yes
	Article Addressed to:	If YES, enter delivery address below: No
	Merch & Co., INC., clo The Corp. Company 2000 Interstate Park Dr.	
	2000 Interstate PARK DR.	
	Ste. 204	3. Service Type Certified Mail Express Mail
	Montgomery, AL. 36109	Registered Return Receipt for Merchandis
	2:06cu242-T	4. Restricted Delivery? (Extra Fee) ☐ Yes
	Article Number (Copy from service label)	7005 1820 0007 2209 1062
	PS Form 3811, July 1999 Domestic Re	eturn Receipt 102595-00-M-0952
		and the second of the second o
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